German Environmental Survey for Adults GerES VI

Questionnaire

about the measurement of chemical pollutants of indoor air

Square sampler

closed

open

Tubular sampler

closed

with diffusion cap

Data logger
to measure temperature
and humidity

To be completed by the interviewer

7-day sampling period, until	. . 20
if possible, until	: (time)

Notes
on completing the questionnaire

- Please use the **enclosed pen** to complete the form.
- Please **do not** write your name or telephone number on the questionnaire.
- Please answer the questions in sequence! Tick what applies to you for each question..
- Unless otherwise indicated, please tick **only one response** for each question.

Do you have a pet?
Ⓧ yes ◯ no

- **Skip a question** only if the box you ticked is followed by the note „continue with question ...“.

◯ yes Ⓧ no ➡ *Continue with question (Q) 12*

- Sometimes **more than one response** is possible. In these cases, the response fields are square and you will find the note: *Multiple responses possible.*

And where is that the case?
Multiple responses possible
☒ at home
☒ at work

- Please enter a response in the free text fields.

What is your current profession?
Flower seller

- If you want to correct the response, black out the wrong response, tick and draw a circle around the correct response. Example:

If the illness has occurred within the last 12 months?
Ⓧ yes ● no ◯ don‘t know

If you have any questions, you can contact us by calling the survey telephone number **+49(0) 800 / 112 11 39 (toll-free)** or by sending an **e-mail** to **GerES@telquest.de.**

GerES Survey Team

Part 1 – Log

1

We would like to know from you how much time you spend in the room where the samplers are installed. Please indicate your dwell times <u>for each day and to the nearest 30 minutes</u>.
Your dwell time for Day 0 was set as guidance for further completion together with the interviewer. The days of the week (Mon, Tue, Wed, ...) and the respective date have also been entered.

2

How often <u>per day</u> was the room aired during <u>these 7 days?</u>
Please enter one tick only per day.

	Weekday	Date	Hours	Minutes	less than once	once	several times	occa-sionally
Day 0		. .			●	●	●	●
Day 1		. .	☐☐	☐☐	○	○	○	○
Day 2.		. .	☐☐	☐☐	○	○	○	○
Day 3.		. .	☐☐	☐☐	○	○	○	○
Day 4.		. .	☐☐	☐☐	○	○	○	○
Day 5.		. .	☐☐	☐☐	○	○	○	○
Day 6.		. .	☐☐	☐☐	○	○	○	○
Day 7.		. .	☐☐	☐☐	○	○	○	○

All fields highlighted in light green are filled in by the interviewer.

Part 2 – Specific pollution

3 **We would request you to tell us whether certain activities were carried out in the room, that particularly affected the indoor air during the 7 days that the indoor air samplers were installed in the room.**
Please answer yes or no or don't know to all the activities listed.

	yes	no	don't know
Cleaning activities			
Standard cleaning or care products used (e.g. for furniture care, floor care, window cleaning)	◯	◯	◯
Disinfectants used	◯	◯	◯
Freshly washed laundry dried in this room	◯	◯	◯
Freshly dry-cleaned clothes stored in this room	◯	◯	◯
Benzine/cleaning alcohol used to remove oil/grease stains	◯	◯	◯
Shoe care products used (e.g. shoe polish or spray)	◯	◯	◯
Fragrance/aroma vaporisers or similar, like incense sticks, fragrance spray, fragrance dispensers used (humidifiers or air conditioning systems are not what are meant here).	◯	◯	◯
Other sprays used (e.g. crop protection, insect spray)	◯	◯	◯
Personal care activities, medicinal therapy			
Body care products used (e.g. deodorant, body lotion, skin oil, cream, hairspray or nail polish).	◯	◯	◯
Inhalable medicines used (e.g. nasal spray, rubbing with essential oils)	◯	◯	◯
Writing, handicraft, painting activities			
3D printer used	◯	◯	◯
Paints, varnishes or plasticines used for handicraft or artistic activities	◯	◯	◯
Strong-smelling materials containing solvents such as felt-tip pens, toners, adhesives, etc. used.	◯	◯	◯
Solvent used (e.g. white spirit, turpentine substitute, acetone or nitro thinner).	◯	◯	◯
Other activities			
Candles, tealights or similar used	◯	◯	◯
Water pipe, shisha	◯	◯	◯
Cigarettes (or other tobacco products, like cigarillos, pipe tobacco)	◯	◯	◯
E-cigarettes	◯	◯	◯

4 **During the 7 days that the indoor air samplers were installed in the room, was any renovation work carried out (in this apartment/house)? For example, wood surfaces painted (window frames, doors, furniture, flooring); floorings laid or glued; walls or ceilings painted, wallpapered, filled.**

◯ yes ◯ no ◯ don‘t know

Part 3 – Documentation of end of sampling

5 **When did you close the samplers and stop the data logger?**

Date ☐☐.☐☐. 20☐☐

Square sampler ☐☐:☐☐ (time)

Tubular sampler ☐☐:☐☐ (time)

Data logger ☐☐:☐☐ (time)

6 **When did you pack the samplers and the data logger using the packing material provided for this purpose?**

Date ☐☐.☐☐. 20☐☐

Square sampler ☐☐:☐☐ (time)

Tubular sampler ☐☐:☐☐ (time)

Data logger ☐☐:☐☐ (time)

7 **How long did it take to complete the questionnaire?**

☐☐☐ Minutes

Please also notify us of any conspicuous observations or events that were not listed in the activities and instructions asked about here, but which could have particularly affected the indoor air and/or the samplers, such as a mishap:

_____

_____

_____

_____

Thank you very much for your participation in this research programme and for completing the questionnaire.

Please return the stamped/addressed envelope to the German Environment Agency (UBA) by post immediately.